## IN THE SUPERIOR COURT FOR THE STATE OF ALASKA In the Matter of: A Minor. CASE NO. Minor's Date of Birth: REQUEST FOR APPOINTED ATTORNEY FOR PARENT/GUARDIAN OF A MINOR \_\_\_\_\_\_ [your full name], ask that the court appoint an attorney to represent me in this case. [Each parent/guardian must fill out their own request if they want separate lawyers.] I am a(n) parent $\square$ legal guardian $\square$ Indian Custodian<sup>1</sup> of the minor child named above. I have the right to have an attorney at public expense, because I am unable to afford an attorney, **and** [check all that apply] ☐ The minor has been ordered by the court to be involuntarily hospitalized for the purpose of a mental health evaluation or for mental health treatment. AS 47.30.775. A petition was filed to appoint a guardian for the minor. I am contesting the proposed guardianship and/or the person who is proposed as guardian. AdR 12(e)(1)(A)(ii). ☐ The minor is an "Indian Child" as defined under the Indian Child Welfare Act, and a petition was filed to adopt the minor or to appoint a guardian for the minor. 25 USC § 1912(b), AdptR 8(b)(1), AdR 12(e)(1)(A)(i). A petition was filed to adopt the minor, alleging that my consent to the adoption is not required. I want to contest this allegation. AdptR 8(b)(3)(B), AdR 12(e)(1)(A)(vii). A petition was filed to terminate my parental rights, alleging that the minor was conceived as a result of sexual assault, sexual abuse of a minor, or incest. I want to contest this allegation. AS 25.23.180(h), AdptR 8(b)(2). A petition was filed by the State, Alaska Legal Services Corporation, or the Alaska Pro Bono Program to terminate my parental rights. AdptR 8(b)(3)(A). ☐ I voluntarily relinquished my parental rights, but my agreement included continued visitation with the minor or other privileges related to contact with the minor. The court

[Explain your situation and the legal authority for the court to appoint a lawyer in that situation.]

has scheduled a review hearing about enforcing these rights. AS 25.23.180(n).

Page 1 of 4 P-910 (4/22)

Other:

<sup>&</sup>quot;Indian custodian" means any Indian person who has legal custody of an Indian child under tribal law or custom or under state law or to whom temporary physical care, custody, and control has been transferred by the parent of such child. 25 USC § 1903(6). Indigent Indian custodians are entitled to appointed counsel in minor guardianship and adoption cases. 25 USC § 1912(b).

<sup>&</sup>quot;Indian child" means any unmarried person who is under age eighteen and is either (a) a member of an Indian tribe or (b) is eligible for membership in an Indian tribe and is the biological child of a member of an Indian tribe." "Indian tribe" includes Alaskan Native villages.  $25 \text{ USC } \S 1903(4) \& (8)$ .

## STATEMENT OF FINANCIAL RESPONSIBILITY

I understand that the court will review my financial statement below, before deciding whether I am eligible for an appointed attorney. I also understand that the court may require me to pay a portion of the attorney costs if I am financially able to. Finally, I understand that I must inform the court if my or my spouse's financial situation improves significantly (for example: change of employment, increase in benefits or salary/wages, receipt of large inheritance).

## FINANCIAL STATEMENT

Your Information	
Date of Birth	
Daytime Phone	
Mailing Address	
	How Long?
[If not employed, give last employer and date terminated.]	
Employer Address	
Employer Phone	<u> </u>
If employed less than one year at current job, fill out th	e following:
Prior Employer Name	How Long?
Prior Employer Address	
Prior Employer Phone	<u> </u>
Your Spouse's Information [Skip this section and go to "Income Information" if (1) you and your spouse do not live together or maintain any share may also skip filling in the columns under "Your Spouse" on page 1.	ed income, expenses, assets, or debts. You
Spouse's Name	Date of Birth
Daytime Phone	
Mailing Address [if different]	
	How Long?
Employer Phone	_
If your spouse has been employed less than one year a	t the current job, fill out the following:
Prior Employer Name	How Long?
Prior Employer Address	
Prior Employer Phone	

25 USC § 1912(b)

I.	INCOME INFORMATION - After taxes, but before other deductions					
a	a. Income during last 12 month	hs. Only write <b>annual</b> amounts. <u>You</u>	Your Spouse			
	Salary/Wages Public Benefits: SNAP, ATAP Unemployment Pension or Retirement Incor Child Support Actually Recei SSDI or SSI VA Disability Dividends: PFD, Alaska Nativ Other:	me ived ve, etc.				
		otal <b>Annual</b> Income				
b	o. Total Current <b>Monthly</b> Inco	ome:				
	Your Current Primary Incom	ne Source				
	Spouse's Current Primary In	come Source				
II.	ASSETS - Present Value If you and your spouse shar	re an asset, list it only in one column. <u>You</u>	Your Spouse			
	Cash (including money in ch Securities: Stocks, Bonds, M Life Insurance Cash Value/A Land, Buildings, Mobile Hom Cars, Trucks, SUVs Recreational Vehicles: Snow Businesses and Business Ass Valuable Personal Property: Household Goods: Furniture Electronics: TVs, Video Gam	Iutual Funds Annuities Thes Thes Thes Thes Thes Thes Thes Th				
III.	Mortgages Vehicle Loans Business Loans	( <b>not</b> regular/monthly payment amounts)  You  \$	Your Spouse			
	Other Loans Unpaid Doctor or Hospital B Credit Card Balances Other: Other:					

IV.	MONTHLY EXP	ENSES			
	If you and you	spouse share an expens	se, list it only in o	ne column.	
				<u>You</u>	Your Spouse
	Food		\$		
		ge (include insurance/pro			
	Transportation Vehicle Loan Re Other Loan Rep Medical Insura	payments	s fare, etc.)		
	Prescriptions/M				
	•	al Support Payments	_		
	Childcare/Dayc				
		Total Expe			
V.	DEPENDENTS				
•	<b>52. 2. 152. 1.</b> 1	<u>Name</u>	<u>Age</u>	Rela	ationship
			_		
			<del>-</del>		
		<u>GENERA</u>	L WAIVER		
about both t under belief.	any income southe Statement of penalty of perjuic I understand the	cluding past employers, to rce I have had for the past Financial Responsibility ry, that this financial states at I give false informating costs and I may be	st three years. I on page 2, and tement is true to t tion on this form,	have read (or this General W the best of my I may be requ	had read to me) /aiver. I declare, knowledge and iired to reimburse
Date			You	ır Signature	
	Date		Cnour	co's Cianatura	
			Spouse's Signature		
	ribed and sworn	to or affirmed before me 	e at		, Alaska
(SEAL)		Court clerk, notary public, or other person authorized to administer oaths.  My commission expires:			